



Thank you for your interest in applying for a scholarship to attend BigStuf 2018. This application will be submitted to our Scholarship Review Team. **Please complete the application in its entirety and provide an accompanying letter of recommendation. Incomplete applications will not be considered.**

Scholarship Information:

BigStuf will award scholarships for the summer of 2018 based on donations received. The scholarships will be awarded in the form of waived or discounted registration fees.

Necessary Documents:

- Completed Scholarship Application Form
- One letter of recommendation from an adult (preferably the youth leader or chaperone attending with the student)

Scholarship Deadlines:

Applications must be received no later than **February 15, 2018**. Final decisions on scholarships awarded will be made no later than **March 9, 2018**. Scholarship recipients will be notified by email.

Scholarship Submission:

Submit completed applications by email to scholarships@bigstuf.com with the subject line "2018 Scholarship Application – *Student Name*"

If you would prefer to mail an application, please note that we are moving to a new office. *If mailing an application before December 1, 2017, please mail to the following address:*

BigStuf Ministries
Attn: Scholarships
31 Church Street
Alpharetta, GA 30009

If mailing an application on or after December 1, 2017, please mail to the following address:

BigStuf Ministries
Attn: Scholarships
6515 Shiloh Rd #100
Alpharetta, GA 30005

If you have any questions regarding this application, please call our office at 770 – 569 – 0207 or email scholarships@bigstuf.com.

Thank you so much!

BigStuf Scholarship Review Team

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Please write legibly in black or blue ink or pencil.

Student Applying for Scholarship

Name: _____

Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Current Grade: _____

Dates of Camp you wish to attend: _____

Church/Group you wish to attend with (please note church/group name, city, and state):

Church/Group Youth Leader or Main Contact:

Name: _____

Phone: _____

Email: _____

Parent/Guardian of Student:

Name: _____

Phone: _____

Email: _____

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Please write legibly in black or blue ink or pencil.

To be filled out by the student applicant:

Have you ever attended a BigStuf Camp before? _____

If yes, what year(s) did you attend? _____

Please describe the financial situation affecting your ability to attend this camp. Please be as specific as possible.

Please explain why you wish to attend BigStuf:

Please remember to include a letter of recommendation with the above application.